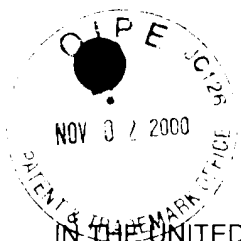


RECEIVED

PATENT
82351.0002

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

TECH CENTER 1500/2900

In re application of:

Elaine Tobin et al.

Serial No: 09/359,026

Filed: July 22, 1999

For: REGULATION OF CIRCADIAN
RHYTHMS AND FLOWERING

Art Unit: 1638

Examiner: A. Mehta

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:
Assistant Commissioner for Patents
Washington D.C. 20231, on
October 30, 2000

Date of Deposit

Kathleen J. Dunn

Signature Date

Commissioner for Patents
Washington, D.C. 20231

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☐ Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a verified statement previously submitted.
- ☐ A verified statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.
- ☐ A certified copy of [COUNTRY] Patent Application No. [APPL'N#] filed [FILING DATE] from which priority is claimed under 35 U.S.C. § 119 is enclosed.
- ☐ A Notice Of Change Of Attorney's Address and Associate Power Of Attorney is enclosed.
- ☒ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	8	-	20	0	LG=\$18 SM=\$9	\$ 0
INDEPENDENT CLAIMS FEE	7	-	8	0	LG=\$80 SM=\$40	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$270 SMALL ENTITY FEE = \$135	\$ 0
TOTAL						\$ 0

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed

- ☐ A check in the amount of \$___ to cover the additional claims fee is enclosed. **A copy of this sheet is enclosed.**
- ☐ A check in the amount of \$___ to cover the extension fee is enclosed. **A copy of this sheet is enclosed.**
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. **A copy of this sheet is enclosed.**
- ☒ Any filing fees under 37 C.F.R. 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. 1.17

Respectfully submitted,
HOGAN & HARTSON L.L.P.By: Stefan J. KirchanskiStefan J. Kirchanski
Registration No. 36,568
Attorney for Applicant(s)

Date: October 30, 2000

Biltmore Tower
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Telephone: 213 337-6700
Facsimile: 213 337-6701



PATENT
82351.0002-1

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NOV 02 2000

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Kathleen J. Dunn

Name

Signature

Date

RESPONSE TO RESTRICTION REQUIREMENT

Box NON-FEE AMENDMENT

Asst. Commissioner for Patents

Washington, D.C. 20231

Dear Sir:

In response to the Restriction Requirement dated September 29, 2000, applicant elects for prosecution the claims of Group I, claims 1, 2, and 4-9. Please cancel claim 3 without prejudice.

If there are any fees due in connection with the filing of this response, please charge the fees to our Deposit Account No. 50-1314.

Respectfully submitted,

HOGAN & HARTSON L.L.P.

Date: October 30, 2000

By: Stefan J. Kirchanski

Stefan J. Kirchanski

Registration No. 36,568

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